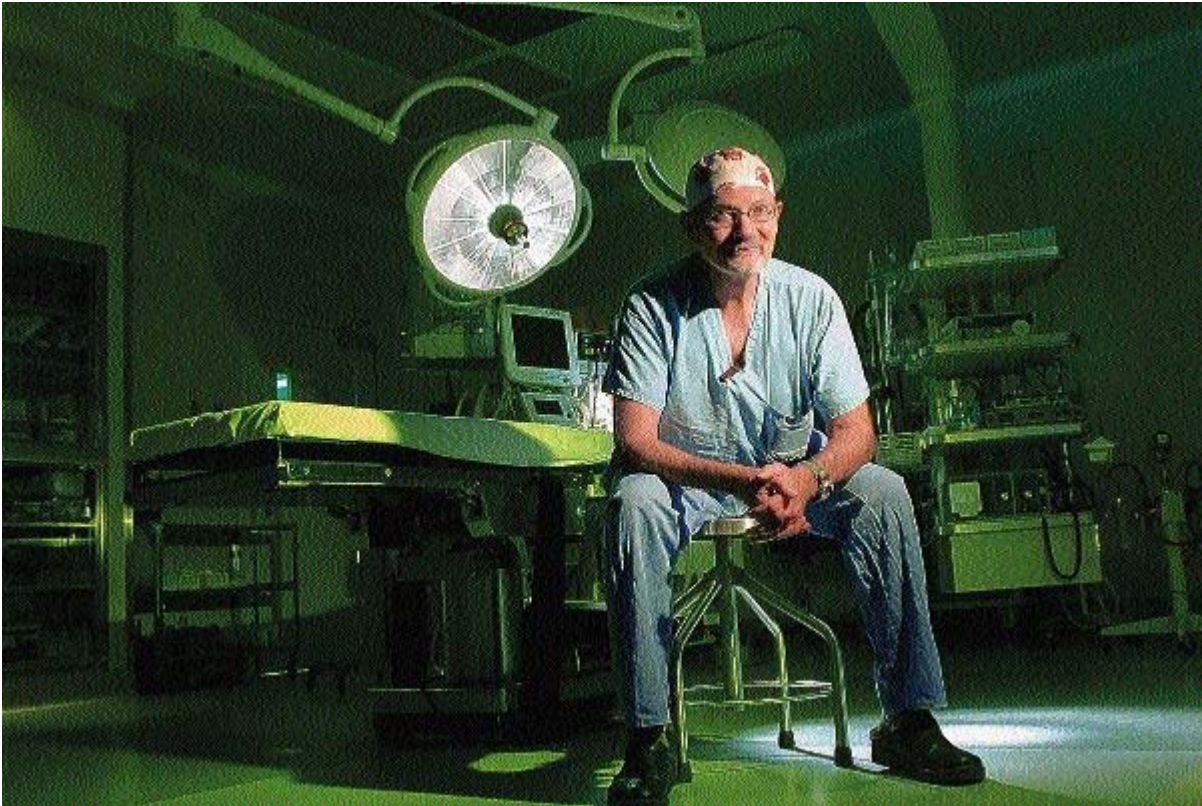


Front-line veterans train new doctors for worst cases

BY PAULINE TAM, THE OTTAWA CITIZEN JULY 6, 2009



Dr. Robin Fairfull-Smith 'There, you don't have to say, "I want suture X or suture Y,'" Dr. Fairfull-Smith says of makeshift equipment. 'You get whatever suture is in stock that week -- if it's in stock at all.'

Photograph by: Julie Oliver, the Ottawa Citizen, The Ottawa Citizen

In the rural hospitals of Africa, operating rooms are far from high tech. The lights could be jury-rigged from the headlights and battery of a car, the surgical instruments sterilized in a pressure cooker. Even basic surgical supplies, such as antibiotics and gloves, can be hard to come by.

No matter how makeshift the equipment, Dr. Robin Fairfull-Smith has seen it. "There, you don't have to say, 'I want suture X or suture Y.' You get whatever suture is in stock that week -- if it's in stock at all," says the 63-year-old Ottawa surgeon, who has lived and worked extensively in Africa.

His role as a volunteer for CNIS, the Canadian Network for International Surgery, is to help young African doctors make the most of what they have, while improving their basic surgical skills.

In Tanzania, where there are 150 formally trained surgeons in a country of 37 million people, the need is particularly great. As a result, young doctors are thrown into overstretched hospitals with a great deal of textbook knowledge, but little hands-on experience. In some cases, "medical officers," with the equivalent training of a nurse practitioner, are expected to perform life-saving operations that only a trained surgeon would be able to do.

During the two-week workshops organized by CNIS, Fairfull-Smith works alongside Tanzanian instructors to help budding doctors practise basic procedures such as caesarean sections, hysterectomies and hernia repairs.

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